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January 27, 2006

To: Assistant Commissioner for Patents	From: Estella Pineiro Patent Administrator 818-493-2251			
Attention: TECHNOLOGY CENTER 3700 Examiner: Dana D. Greene Art Unit: 3762	ST. JUDE MEDICAL CRMD 15900 Valley View Court Sylmar, California 91392-9221			
Telecopier: 571-273-8300	Telecopier: 818/362-4795			
RE: Filing of	Number of pages being sent:			
Amendment and Request for Reconsideration				
App. No.: 10/736,111 Filed: 12/12/2003 Docket No.: A03P1079US01				
Confirmation No.: 3654				

PLEASE DELIVER TO EXAMINER DANA GREENE, Art Unit 3762. Thank you.

Ø 002

JAN 2 7 2006

PATENT

<u>IN THE UNITED STATES PATENT AND TRADEMARK OFFICE</u>

Applicant:

Jong Kil et al.

Confirmation No.:

3654

Serial No.:

10/736,111

Examiner:

Dana D. Greene

Filed:

12/12/2003

Art Unit:

3762

Docket No.:

A03P1079US01

For:

SYSTEM AND METHOD FOR EMULATING A SURFACE EKG

USING INTERNAL CARDIAC SIGNALS SENSED

BY AN IMPLANTABLE MEDICAL DEVICE

TRANSMITTAL LETTER, FEE AND CERTIFICATE OF MAILING

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Submitted herewith for filing are the following documents:

- Amendment and Request for Reconsideration <u>X</u>
- Transmittal Letter, Fee and Cert. of Mailing

TEM		NO. OF CLAIMS REMAINING	NO. OF CLAIMS PREVIOUSLY PAID FOR	ADD'L CLAIMS FILED	LARGE ENTITY FEE		\$ FEE
Α	TOTAL CLAIMS FEE	16	16	0	X \$ 50	\$	0
В	INDEPENDENT CLAIMS FEE**	3	.3	0	X \$200		0
С	MULTIPLE- DEPENDENT		1		×\$ 360		0
D	EXTENSION OF TIME FEE — 1-mon: \$120; 2-mon: \$450; 3-mon: \$1,020; 4-mon: \$1,590; 5-mon: \$2,160						0
E	ADDITIONAL FEES (I.e., Surcharge - Late Fee- Declaration; Petitions; Information Disclosure Statement; Terminal Disclaimer, etc.) Specify:						0
F	TOTAL ADDITIONAL FEE** (ADD TOTALS FOR LINES A,B,C,D, and E)						0**

X

Charge Deposit Account No. 16-0068

\$0**

A copy of this letter is enclosed.

the amount of

PATENT

- The Commissioner is hereby authorized to charge payment of the following fees Χ associated with this communication or credit any overpayment to Deposit Account No. 16-0068
 - Any additional filing fees required under 37 CFR 1.16.
 - Any patent application processing fees under 37 CFR 1.17.
- The Commissioner is hereby authorized to charge payment of the following fees during Х the pendency of this application or credit any overpayment to Deposit Account No. 16-0068
 - Any patent application processing fees under 37 CFR 1.17.
 - <u>X</u> X Any filing fees under 37 CFR 1.16 for presentation of extra claims.

Respectfully submitted,

Date

Peter A. Nichols, Reg. No. 47,822 Patent Attorney for Applicants

CUSTOMER NUMBER: 36802

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office

on:

1/27/06

RECEIVED CENTRAL FAX CENTER

PATENT

JAN 2 7 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s):

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Confirmation No.: 3654

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10/736,111

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BY AN IMPLANTABLE MEDICAL DEVICE

AMENDMENT AND REQUEST FOR RECONSIDERATION

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22213-1450 I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on

January 27, 2006

Dear Sir:

Please consider the following remarks in response to the Office Action dated November 1, 2005. Applicants include herewith a complete listing of the pending claims, without amendment for the Examiner's convenience.